

Application Data Sheet**APPLICATION INFORMATION**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: Sealing Strip for a Closure Member

Attorney Docket Number:: 245545

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Achim
Middle Name::
Family Name:: Plum
Name Suffix::
City of Residence:: Viersen
State or Prov. of Residence::
Country of Residence:: DE
Street of mailing address:: Immelnbush 60

City of mailing address:: Viersen
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 41748
Inventor Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Reimund
Middle Name::
Family Name:: Plotnik
Name Suffix::
City of Residence:: Nettetal
State or Prov. of Residence::
Country of Residence:: DE
Street of mailing address:: Wilhelm Reimes Strasse 4

City of mailing address:: Nettetal
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 41334

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Sandro
Middle Name::
Family Name:: Wartzack
Name Suffix::
City of Residence:: Hallstadt
State or Prov. of Residence::
Country of Residence:: DE
Street of mailing address:: Erlweinstrasse 17

City of mailing address:: Hallstadt
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: D-96103

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Thomas
Middle Name::
Family Name:: Pohl
Name Suffix::
City of Residence:: Grossenseebach
State or Prov. of Residence::
Country of Residence:: DE
Street of mailing address:: Elsterweg 14

City of mailing address:: Grossenseebach
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: D-91091

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Markus
Middle Name::
Family Name:: Schultz
Name Suffix::
City of Residence:: Nuernberg
State or Prov. of Residence::
Country of Residence:: DE
Street of mailing address:: Bielefelder Strasse 36a

City of mailing address:: Nuernberg
State or Province of mailing address:: DE
Country of mailing address:: D-90425
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Manfred
Middle Name::
Family Name:: Stenzel
Name Suffix::
City of Residence:: Bamberg
State or Prov. of Residence::
Country of Residence:: DE
Street of mailing address:: Friedrichstrasse 13

City of mailing address:: Bamberg
State or Province of mailing address::
Country of mailing address:: DE

Postal or Zip Code of mailing address:: D-96047

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Ralf
Middle Name::
Family Name:: Dillenburger
Name Suffix::
City of Residence:: Vilafranca
State or Prov. of Residence::
Country of Residence:: ES
Street of mailing address:: C/Cid No. 3

City of mailing address:: Vilafranca
State or Province of mailing address::
Country of mailing address:: ES
Postal or Zip Code of mailing address:: E-08720

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ES
Status:: Full Capacity
Given Name:: Jose
Middle Name::
Family Name:: Cuenca
Name Suffix::
City of Residence:: Rubi
State or Prov. of Residence::
Country of Residence:: ES
Street of mailing address:: Ctra. Sabatell 18 2.3.

City of mailing address:: Rubi
State or Province of mailing address::

Country of mailing address:: ES
Postal or Zip Code of mailing address:: E-80191

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Christian
Middle Name::
Family Name:: Schramm
Name Suffix::
City of Residence:: Guardiola de Font-Rubi
State or Prov. of Residence::
Country of Residence:: ES
Street of mailing address:: C/Carrerada No. 20

City of mailing address:: Guardiola de Font-Rubi
State or Province of mailing address::
Country of mailing address:: ES
Postal or Zip Code of mailing address:: E-08736

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Manfred
Middle Name::
Family Name:: Frei
Name Suffix::
City of Residence:: St. Pere des Ribes/Barcelona
State or Prov. of Residence::
Country of Residence:: ES
Street of mailing address:: Calle Puigsacalm No. 9

City of mailing address:: St. Pere des Ribes/Barcelona

State or Province of mailing address::

Country of mailing address:: ES

Postal or Zip Code of mailing address:: E-08810

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Martin

Middle Name::

Family Name:: Schlechtriemen

Name Suffix::

City of Residence:: Breitenguessbach

State or Prov. of Residence::

Country of Residence:: DE

Street of mailing address:: Kapellenstrasse 25

City of mailing address:: Breitenguessbach

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: D-96149

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23460

Phone:: (312) 616-5600

Fax:: (312) 616-5700

E-mail Address:: mail@leydig.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 23460

Representative Designation:: Registration Number:: Representative Name::

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IB2004/001897	06/10/04

FOREIGN APPLICATION INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed
GB	0313364.2	06/10/03	Yes
GB	0313942.5	06/16/03	Yes

ASSIGNEE INFORMATION

Assignee name:: GDX North America Inc.
Street of mailing address:: 615 South DuPont Highway

City of mailing address:: Dover
State or Province of mailing address:: Delaware
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19901

Assignee name:: Brose Fahrzeugteile GmbH & Co. KG Coburg
Street of mailing address:: Ketschendorfer Strasse 38-50

City of mailing address:: Coburg
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: D-96450